

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE 29 / 52	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Lisa Murkowski for U.S. Senate

A.

Full Name (Last, First, Middle Initial)

Dwight Ellerbe

Mailing Address 3521 Cutlass Circle

City

Anchorage

State

AK

Zip Code

99516

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Physician

Receipt For: 2010

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
09 / 30 / 2008

Transaction ID: 81005.C12242

Amount of Each Receipt this Period

500.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)

Jayne Ellerbe

Mailing Address 17002 Briarcliff Pt Circle

City

Anchorage

State

AK

Zip Code

99516

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Nurse Practitioner

Receipt For: 2010

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
09 / 30 / 2008

Transaction ID: 81005.C12243

Amount of Each Receipt this Period

500.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)

Ilona Jean Farr

Mailing Address 3945 Geneval Place

City

Anchorage

State

AK

Zip Code

99508

FEC ID number of contributing
federal political committee.

C

Name of Employer
Alaska Family Medical Care

Occupation
Physician

Receipt For: 2010

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY
08 / 19 / 2008

Transaction ID: 81005.C12222

Amount of Each Receipt this Period

300.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

1300.00

TOTAL This Period (last page this line number only)